

Clean Vessel Act Program
NH Dept. of Environmental Services
29 Hazen Drive, PO Box 95
Concord, NH 03302-0095
Phone: (603) 271-0698
Fax: (603) 271-7894



Request for Funds

http://www.des.nh.gov/wmb/cva

Construction of New Pumpout or Dump Stations

Name of Marina:				
Contact Person:				
Physical Address:				
Mailing Address:				
City/State/Zip:				
Fax:				
 Please locate your marina on a USGS topographic or other suitable map and attach to this application. 				
2. Construction time frame: if funded, when will you likely install a boat pumpout or dump station? Year:				
. What type of facility are you interested in?				
Pumpout Dump Combination				
(Please note, DES encourages the combination pumpout/dump station.)				
4. Describe access constraints to your marina, if any. (Are there shoals, bridges, rocks, etc. tha limit access to your marina from the surrounding area?)				
5. What public facilities/services does the marina provide?				
*The CVA grant program requires that the boating public be able to utilize any facility that i built with program money.				

6.	Approximately how many boats, based on the following size categories, does your marina service each year?				
		16-25 feet	26-40 feet	Greater than 40 feet	
7.	Provide information on the adequacy of the marina's sanitary facilities. If the marina is served by a septic system, is it sized adequately to handle additional boat wastes? If the marina is served by a town sewer line, how far is the line from the service dock, and will the town's waste water treatment facility accept the additional boat wastes? Please provide documentation to support this.				
8.	Estimate the total to inst underground utilities, etc as well. Estimate conser	c. The grant requires a	1 25% match by the	marina; please include this	
9.	Fees charged for use of a pumpout/dump station funded with Clean Vessel Act funds must be \$5 or less. What fee, if any, will the marina charge boaters?				
Your signature			Date		
	Thank you	y. Walash fammand to	magairing ways asso	noral	

Thank you! We look forward to receiving your proposal.

If you have any questions, please contact Alicia Carlson at (603) 271-0698. acarlson@des.state.nh.us

Please return this form to: NHDES ATTN: Alicia Carlson PO Box 95 Concord, NH 03302-0095

Or, fax to: (603) 271-7894